

Introduction

The fellowship programme is run through the Joint Committee on Surgical Training (JCST).

Fellowship posts are open to all higher surgical and where appropriate, non-surgical trainees, that meet the person specifications. Details of eligibility are found through the <u>JCST</u>.

Any unit applying to host Training Interface Group fellows must have trainer representation from all parent specialties.

Applicant units are required to be able to deliver the TIG curriculum and adhere to the quality indicators (QIs). The curriculum can be found on the ISCP website in the curricula of the most relevant parent Specialties (as mentioned above) and the QIs are listed on the ICST website.

The data included in the form below is an extract of the data submitted by the unit in their application to become a TIG unit.

Unit Lead Trainer:

Name	
Ms P Rust	

Local Educational Provider (LEP)

Main hospitals/trusts involved with teaching (base units):

	Hospital/Trust A	Hospital/Trust B	Hospital/Trust C
Name of Trust	St John's Hospital	Royal Hospital for Sick Children	Royal Infirmary Edinburgh
Address of Trust	Hooper Hand Unit, Howden Road West, Livingston, West Lothian. EH54 6PP	9 Sciennes Road, Edinburgh. EH9 1LF	51 Little France Crescent, Edinburgh. EH16 4SA

Peripheral units (if to be visited by trainee):

	Hospital/Trust N	Hospital/Trust O	Hospital/Trust P	
Name of Trust	Greater Glasgow & Clyde			
Address of Trust	Adult Brachial Plexus Service			
	New Victoria Hospital			
	GLASGOW			
	G42 9LF			

LEP Consultants / Trainers

Primary Educational Supervisor (may be a trainer): Miss P Rust

Main Trainer(s) involved with fellowship:

A main trainer must undertake more than five programmed activities (PA) in their job plan and they must also be a surgeon primarily in the relevant subspecialty area and recognised by the GMC as a trainer. At least one trainer from each specialty must have five years full time experience in the NHS.

List of parent Specialties of main trainers:

Parent Specialty	Number of main trainers from this Specialty
Plastic Surgery	4
Orthopaedic Surgery	2

Other Trainer(s) involved with fellowship:

Parent Specialty	Number of other trainers from this Specialty
Orthopaedics	4
Radiology	2

Any other Specialties who are members of the multidisciplinary team not already mentioned as appropriate to the TIG:

Specialty	Trust A (numbers)	Trust B (numbers)	Trust C (numbers)
Rheumatology	3		
Neurophysiology	1		
Hand Therapy	3	1	2

Indicative Timetable

The fellow should be based at the main hospitals/Trusts for most of their educational activity but one session (professional activity) may occur outside these units each week. A trainee may work for 48 hours per week and if there is no on-call, all this time may be used for training.

Below is an indicative timetable that indicates the type of proposed activity and includes supporting professional development (SPD). SPD should be one half day each week. Please note that the timetable must be compatible with the Quality Indicators specific to the relevant TIG. All Quality Indicators may be found online at: https://www.jcst.org/training-interface-groups/quality-processes/

Types of activityCombined outpatient clinic (COC)

Other outpatient clinics (OOC)
Operating theatre (Th)
Multi-disciplinary team meeting (MDT)
Supporting Professional Development (SPD)
Teaching ward round (WR)
Research activities (RA)

Please indicate the activity and the trust, for example, MDT (A) or Th (B). Sample timetable:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	Elective hand OPD / Congenital hand theatre	Hand trauma theatre	Elective hand theatre	Elective hand theatre	Trauma Hand OPD		
Afternoon	Research activities	Supporting Professional Development	Elective hand OPD	Elective hand theatre	Week 3 only – Combined outpatient OPD Week 2 Congenital hand clinic		
Evening							

Training Delivery

Please an overview of the Unit's TIG Fellowship Training Delivery plan:

Module 1: Skin / Soft tissue / Microsurgery / Dupuytren's Disease

Huge population of patients with aggressive Dupuytren's disease. Team offers the full gamut of management options for Dupuytren's disease including for recurrent disease. The team are taking part in clinical trials related to Dupuytren's disease, and have recently joined the DISC trial.

Plastics unit sees large numbers of both benign and malignant skin lesions. Plenty of training for basic techniques of excision of lesions.

Burns unit incorporated within the St John's Hospital plastics department, with two dedicated burns surgeons.

Able to offer wide range of reconstructive procedures for complex bone and skin lesions and injuries – experienced microsurgical team.

Module 2: Fractures and Joint Injuries including Wrist instability

Team manages all the open hand fractures presenting across the Lothian sites. Experienced management of PIP joint fracture-dislocations.

Complex hand and wrist injuries managed at SJH.

Acute wrist fracture management at the RIE site in Edinburgh, with SJH site taking complex fracture dislocations of the carpus.

Miss Rust and a colleague manage the carpal instability patients with tertiary referrals from Fife, the Borders and Highland areas.

Dedicated hand trauma clinics running daily, hand trauma lists up to five times per week. Most hand trauma patients are managed on a day case basis.

Module 3: Osteoarthritis and inflammatory arthritis

Large cohort of patients with OA of the hands and wrists, especially thumb base OA.

Specialist clinics devoted to thumb base OA.

Close links with the Rheumatology team across the Lothians and Borders, who refer the appropriate patients for surgical management.

Module 4: Tendon and tendon-related disorders

St John's is the regional unit managing all flexor tendon injuries with a well established in-house hand therapy team. Secondary reconstruction techniques are offered also.

All extensor tendon injuries from West Lothian are managed in-house.

Module 5: Nerve and nerve related disorders

Vast experience of Carpal Tunnel Syndrome with dedicated clinic to this condition. Close liaison with Neurophysiologist.

Regular nerve repairs and reconstructions undertaken for traumatic injuries.

Tendon and nerve transfers undertaken as indicated.

Input from the Scottish National Brachial Plexus Service in Glasgow.

Spasticity service is run in conjunction with rehabilitation service at Astley Ainslie Hospital.

Module 6: The child's hand, vascular disorders and tumours

Dedicated paediatric congenital hand service based at the Royal Hospital for Sick Children (RHSC) in Edinburgh receiving referrals from south east Scotland and Highlands. The team is heavily involved in research into congenital hand differences and has links with the Roslin Research Group.

Involvement in the regional sarcoma service for the Lothians. Combined operating strategies for optimal management of lesions.

Service involvement in vascular lesions including complex vascular malformations.